

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2024

Open to Public
Inspection

A For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SECOND HARVEST FOOD BANK OF MIDDLE TN, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 331 GREAT CIRCLE ROAD City or town, state or province, country, and ZIP or foreign postal code NASHVILLE, TN 37228 F Name and address of principal officer: HEATHER VERBLE SAME AS C ABOVE	D Employer identification number 62-1049447 E Telephone number (615) 329-3491 G Gross receipts \$ 167,930,276. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.SECONDHARVESTMIDTN.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1978
M State of legal domicile: TN		

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO NOURISH AND EMPOWER PEOPLE SO THEY CAN THRIVE.			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	29	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29	
	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	164	
	6	Total number of volunteers (estimate if necessary)	6	30058	
		7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b		Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 95,875,371.	Current Year 101,394,807.	
	9	Program service revenue (Part VIII, line 2g)	53,001,626.	53,909,306.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,064,983.	1,437,491.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	90,246.	-94,500.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	150,032,226.	156,647,104.	
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	72,129,395.	73,104,393.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,335,259.	12,048,559.	
16a		Professional fundraising fees (Part IX, column (A), line 11e)	874,775.	989,384.	
b		Total fundraising expenses (Part IX, column (D), line 25)	4,654,650.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	63,501,988.	63,486,657.	
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	147,841,417.	149,628,993.	
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	2,190,809.	7,018,111.	
			Beginning of Current Year	End of Year	
		20	Total assets (Part X, line 16)	80,862,393.	88,329,813.
		21	Total liabilities (Part X, line 26)	12,176,266.	10,518,483.
	22	Net assets or fund balances. Subtract line 21 from line 20	68,686,127.	77,811,330.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer HEATHER VERBLE, CFO Type or print name and title	Date		
Paid Preparer Use Only	Preparer's name FRANCES E LEAHY	Preparer's signature FRANCES E LEAHY	Date 12/21/25	Check if self-employed <input type="checkbox"/> PTIN P00713593
	Firm's name BAKER TILLY ADVISORY GROUP, LP	Firm's EIN 39-0859910	Phone no. 615-242-7351	
	Firm's address 555 GREAT CIRCLE ROAD NASHVILLE, TN 37228			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

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INC.

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☒ **X**

1 Briefly describe the organization's mission:

SECOND HARVEST FOOD BANK OF MIDDLE TENNESSEE, INC. (THE "FOOD BANK" OR "SECOND HARVEST") WAS FOUNDED IN 1978. ITS MISSION IS TO NOURISH AND EMPOWER PEOPLE SO THEY CAN THRIVE. THE FOOD BANK IS ONE OF MORE THAN 200 CERTIFIED MEMBERS OF FEEDING AMERICA, THE NATION'S FOOD BANK

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 74,153,827. including grants of \$ 60,533,025.) (Revenue \$ 473,411.)

COMMUNITY FOOD PARTNERS - OUR WORK INCLUDES ACTIVITIES CONDUCTED TO FULFILL SECOND HARVEST'S MISSION TO NOURISH AND EMPOWER PEOPLE IN 46 COUNTIES ACROSS MIDDLE AND WEST TENNESSEE SO THEY CAN THRIVE. SPECIFIC PROGRAMS WITHIN THIS CATEGORY INCLUDE:

PARTNER AGENCIES - SECOND HARVEST PROVIDED NEARLY 51 MILLION POUNDS OF FOOD DURING THE YEAR ENDED JUNE 30, 2025 (OR MORE THAN 42 MILLION MEALS) TO APPROXIMATELY 410 NOT-FOR-PROFIT AGENCIES, INCLUDING FOOD PANTRIES, CONGREGATE MEAL SITES, AND EMERGENCY FOOD PROGRAMS. THESE PARTNERS WORK THROUGHOUT THEIR RESPECTIVE COMMUNITIES TO ASSIST FOOD INSECURE FAMILIES.

4b (Code:) (Expenses \$ 49,127,211. including grants of \$) (Revenue \$ 53,435,895.)

PROJECT PRESERVE SALES ARE REPORTED NET OF ALLOWANCES FOR DISCOUNTS AND RETURNS. PROJECT PRESERVE SELLS PRODUCTS PRIMARILY TO OUT-OF-AREA AGENCIES IN THE FEEDING AMERICA NETWORK THROUGH A PROPRIETARY E-COMMERCE WEBSITE BUT ALSO SELLS TO PARTNER AGENCIES WITHIN THE FOOD BANK'S LOCAL AREA.

IN FY2024, PROJECT PRESERVE BEGAN LISTING PRODUCTS FOR SALE ON THE FEEDING AMERICA GROCERY PURCHASING PORTAL (GPP). THOSE SALES CONTINUED IN FY2025 WITH 65 PRODUCT ORDERS GENERATING \$2.4 MILLION IN SALES.

ANOTHER COMPONENT OF PROJECT PRESERVE IS TO PROVIDE DISASTER RELIEF. FOR THE YEAR ENDING JUNE 30, 2025, PROJECT PRESERVE WAS ABLE TO RESPOND

4c (Code:) (Expenses \$ 13,453,384. including grants of \$ 10,712,567.) (Revenue \$)

MOBILE FOOD PROGRAMS - THE MOBILE PANTRY PROGRAM REACHES NEARLY ALL OF SECOND HARVEST'S 46 COUNTIES AND IS A LARGE-SCALE, ONE-DAY DISTRIBUTION OF PERISHABLE AND NON-PERISHABLE FOOD TO FAMILIES IN NEED. DURING THE YEAR ENDED JUNE 30, 2025, MORE THAN 4.6 MILLION POUNDS OF FOOD WAS DISTRIBUTED THROUGH THIS PROGRAM'S 206 EVENTS.

SECOND HARVEST OPERATES THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) WHICH WORKS TO IMPROVE THE HEALTH OF LOW-INCOME INDIVIDUALS AT LEAST 60 YEARS OF AGE BY SUPPLEMENTING THEIR DIETS WITH NUTRITIOUS USDA FOODS. IN THE YEAR ENDED JUNE 30, 2025, MORE THAN 21,000 BOXES WERE DISTRIBUTED TO QUALIFIED SENIORS IN DAVIDSON COUNTY.

4d Other program services (Describe on Schedule O.)

(Expenses \$ 6,564,345. including grants of \$ 1,858,801.) (Revenue \$)

4e Total program service expenses 143,298,767.

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 84	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 164		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒ **X**

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 29 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent 1b 29			
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X	
13 Did the organization have a written whistleblower policy?	13	X	
14 Did the organization have a written document retention and destruction policy?	14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a The organization's CEO, Executive Director, or top management official	15a	X	
b Other officers or key employees of the organization	15b	X	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed TN

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
HEATHER VERBLE, CFO - (615) 329-3491
331 GREAT CIRCLE ROAD, NASHVILLE, TN 37228

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Form 990 (2024)

62-1049447 Page **7**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NANCY KEIL PRESIDENT/CEO	60.00			X				402,823.	0.	36,718.
(2) HEATHER VERBLE CFO	50.00			X				221,203.	0.	28,054.
(3) KIM MOLNAR (END 8/24) COO	37.50				X			168,290.	0.	19,578.
(4) KARYN THOMPSON VP, HUMAN RESOURCES	50.00					X		152,462.	0.	21,952.
(5) TRACEY ALDERDICE VP, COMMUNITY IMPACT	50.00					X		139,408.	0.	24,347.
(6) MICHAEL MICHLOWSKI DIR. TECHNOLOGY	37.50					X		132,690.	0.	27,302.
(7) TROY EDWARDS (START 4/24) COO	50.00					X		149,858.	0.	8,010.
(8) ALICIA COPPLEY (END 2/25) SR. DIR. PHILANTHROPY	37.50					X		124,333.	0.	28,182.
(9) JENNIFER PETERS CHAIR	4.00	X		X				0.	0.	0.
(10) DREW BERG VICE CHAIR	4.00	X		X				0.	0.	0.
(11) BRUCE ESWORTHY TREASURER	1.30	X		X				0.	0.	0.
(12) SONYA HOSTETLER SECRETARY	1.30	X		X				0.	0.	0.
(13) BRAD MARKS DIRECTOR	1.30	X						0.	0.	0.
(14) DEREK SCHRAW DIRECTOR	1.30	X						0.	0.	0.
(15) RYAN TABOR DIRECTOR	1.30	X						0.	0.	0.
(16) CARMAN WENKOFF DIRECTOR	1.30	X						0.	0.	0.
(17) MICHELLE BONNETT DIRECTOR	1.30	X						0.	0.	0.

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
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Form 990 (2024)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DARREN DEGENNARO DIRECTOR	1.30	X						0.	0.	0.
(19) DAVE ALPERSON DIRECTOR	1.30	X						0.	0.	0.
(20) DAVID WHELAN DIRECTOR	1.30	X						0.	0.	0.
(21) DWAYNE GREENE DIRECTOR	1.30	X						0.	0.	0.
(22) ERIN WILKINS DIRECTOR	1.30	X						0.	0.	0.
(23) FINIS STRIBLING III DIRECTOR	1.30	X						0.	0.	0.
(24) GERARD BULLOCK DIRECTOR	1.30	X						0.	0.	0.
(25) JEROME KATZ DIRECTOR	1.30	X						0.	0.	0.
(26) DR. JULIANA OSPINA CANO DIRECTOR	1.30	X						0.	0.	0.
1b Subtotal								1,491,067.	0.	194,143.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,491,067.	0.	194,143.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 15

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
VERITIV LANDSBERG, 6600 VALLEY VIEW STREET, BUENA PARK, CA 90620	PRODUCT ASSEMBLY	1,503,905.
RKD GROUP, LLC PO BOX 843595, DALLAS, TX 75284	DIRECT MAIL CONSULTANT	1,030,631.
NOLAN TRANSPORTATION GROUP, LLC PO BOX 931184, ATLANTA, GA 31193	FREIGHT	816,202.
C.H. ROBINSON COMPANY, INC. 14701 CHARLSON ROAD, EDEN PRAIRIE, MN 55347	FREIGHT	717,609.
AXLE LOGISTICS 835 N. CENTRAL STEET, KNOXVILLE , TN 37917	FREIGHT	517,581.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 22

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2024)

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

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Part VII Section A. **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) KIM LESS DIRECTOR	1.30	X						0.	0.	0.
(28) LEE CUNNINGHAM DIRECTOR	1.30	X						0.	0.	0.
(29) LINDSEY PAOLA DIRECTOR	1.30	X						0.	0.	0.
(30) BROOKE BAIRD SMITH DIRECTOR	1.30	X						0.	0.	0.
(31) NANCY YOUSSEF DIRECTOR	1.30	X						0.	0.	0.
(32) ROB COOK DIRECTOR	1.30	X						0.	0.	0.
(33) RUZA SHELLAWAY DIRECTOR	1.30	X						0.	0.	0.
(34) SUZANNE BUCHANAN DIRECTOR	1.30	X						0.	0.	0.
(35) TUWISHA ROGERS DIRECTOR	1.30	X						0.	0.	0.
(36) UTE STRAND DIRECTOR	1.30	X						0.	0.	0.
(37) WADE HUNT DIRECTOR	1.30	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	540,636.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	22498048.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	78356123.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 76244880.				
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a PROJECT PRESERVE PROGR	Business Code	624200	53435895.	53435895.		
	b AGENCY PROVISIONS		624200	473,411.	473,411.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			53909306.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,400,295.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real (ii) Personal				
b Less: rental expenses ...		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities (ii) Other	10954348			
b Less: cost or other basis and sales expenses		7b		10917152			
c Gain or (loss)		7c		37,196.			
d Net gain or (loss)				37,196.			37,196.
8 a Gross income from fundraising events (not including \$ 540,636. of contributions reported on line 1c). See Part IV, line 18		8a		271,520.			
b Less: direct expenses		8b		366,020.			
c Net income or (loss) from fundraising events				-94,500.			-94,500.
9 a Gross income from gaming activities. See Part IV, line 19		9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
	12 Total revenue. See instructions			156647104.	53909306.	0.	1342991.

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	71,925,745.	71,925,745.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,178,648.	1,178,648.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	824,597.	468,628.	179,535.	176,434.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,607,586.	6,359,080.	491,120.	1,757,386.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	547,138.	404,778.	30,653.	111,707.
9 Other employee benefits	1,384,769.	992,691.	108,256.	283,822.
10 Payroll taxes	684,469.	497,676.	47,547.	139,246.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	70,201.		70,201.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	989,384.			989,384.
f Investment management fees	48,525.		48,525.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	858,876.	732,013.	43,867.	82,996.
12 Advertising and promotion	685,360.	249,458.	34,624.	401,278.
13 Office expenses	843,580.	187,823.	303,219.	352,538.
14 Information technology	701,748.	404,031.	44,894.	252,823.
15 Royalties				
16 Occupancy	2,339,472.	2,294,250.	35,187.	10,035.
17 Travel	117,381.	84,659.	13,486.	19,236.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	21,826.	8,794.	5,013.	8,019.
20 Interest	88,833.		88,833.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,174,615.	1,103,813.	35,263.	35,539.
23 Insurance	446,114.	401,503.	22,305.	22,306.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a FOOD SUPPLIES & DISTRIB	52,964,813.	52,911,164.	45,189.	8,460.
b PRODUCT TRANSPORTATION	3,097,454.	3,094,013.	0.	3,441.
c NATIONAL NETWORK DUES	27,859.	0.	27,859.	0.
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	149,628,993.	143,298,767.	1,675,576.	4,654,650.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	5,958,817.	1	8,358,740.
	2 Savings and temporary cash investments	13,595,289.	2	12,214,319.
	3 Pledges and grants receivable, net	6,536,365.	3	6,179,470.
	4 Accounts receivable, net	3,279,168.	4	1,558,960.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	234,279.	9	257,712.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	40,838,892.		
	b Less: accumulated depreciation	14,322,542.		
	11 Investments - publicly traded securities	16,348,276.	10c	26,516,350.
	12 Investments - other securities. See Part IV, line 11	23,712,627.	11	22,907,028.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	11,197,572.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	80,862,393.	15	10,337,234.	
17 Accounts payable and accrued expenses	4,294,405.	16	88,329,813.	
18 Grants payable		17		
19 Deferred revenue	1,937,043.	18	3,952,026.	
20 Tax-exempt bond liabilities		19	879,862.	
21 Escrow or custodial account liability. Complete Part IV of Schedule D		20		
22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		21		
23 Secured mortgages and notes payable to unrelated third parties	2,560,507.	22		
24 Unsecured notes and loans payable to unrelated third parties		23	2,511,111.	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,384,311.	24		
26 Total liabilities. Add lines 17 through 25	12,176,266.	25	3,175,484.	
27 Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.		26	10,518,483.	
28 Net assets without donor restrictions	65,899,298.			
29 Net assets with donor restrictions	2,786,829.			
30 Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
31 Capital stock or trust principal, or current funds		27	75,380,069.	
32 Paid-in or capital surplus, or land, building, or equipment fund		28	2,431,261.	
33 Retained earnings, endowment, accumulated income, or other funds		29		
34 Total net assets or fund balances	68,686,127.	30		
35 Total liabilities and net assets/fund balances	80,862,393.	31	77,811,330.	
36 Total liabilities and net assets/fund balances	80,862,393.	32	88,329,813.	

Form **990** (2024)

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Form 990 (2024)

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	156,647,104.
2	Total expenses (must equal Part IX, column (A), line 25)	2	149,628,993.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,018,111.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	68,686,127.
5	Net unrealized gains (losses) on investments	5	2,107,092.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	77,811,330.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☒

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	X

Form **990** (2024)

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	SECOND HARVEST FOOD BANK OF MIDDLE TN, INC.	Employer identification number	62-1049447
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The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

g Provide the following information about the supported organization(s).						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule A (Form 990) 2024

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	100352622	87243747.	88701167.	95875371.	101394807	473567714
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	100352622	87243747.	88701167.	95875371.	101394807	473567714
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						62088673.
6 Public support. Subtract line 5 from line 4.						411479041

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	100352622	87243747.	88701167.	95875371.	101394807	473567714
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	98,946.	567,020.	986,218.	1379281.	1400295.	4431760.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	30,687.	20,918.		90,246.		141,851.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						478141325
12 Gross receipts from related activities, etc. (see instructions)					12 251,048,148.	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	86.06 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	87.95 %
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		
		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		
		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		
		<input type="checkbox"/>

Schedule A (Form 990) 2024

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule A (Form 990) 2024

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Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule A (Form 990) 2024

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Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule A (Form 990) 2024

62-1049447 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors <i>(explain in detail in Part VI):</i>			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990) 2024

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule A (Form 990) 2024

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (describe in Part VI). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

**Schedule B
(Form 990)**(Rev. December 2024)
Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.

Employer identification number

62-1049447

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.**Special Rules**☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Employer identification number

62-1049447**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>14,220,993.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>7,463,444.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>4,646,410.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>4,398,492.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>17,069,329.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>2,042,494.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

62-1049447

Part I

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 3,260,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SECOND HARVEST FOOD BANK OF MIDDLE TN, INC.	Employer identification number 62-1049447
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	7,328,429 LBS OF FOOD _____ _____ _____	\$ <u>13,924,015.</u>	_____
<u>2</u>	3,815,917 LBS OF FOOD _____ _____ _____	\$ <u>7,250,242.</u>	_____
<u>3</u>	2,402,671 LBS OF FOOD _____ _____ _____	\$ <u>4,565,075.</u>	_____
<u>4</u>	2,314,996 LBS OF FOOD _____ _____ _____	\$ <u>4,398,492.</u>	_____
<u>5</u>	8,562,809 LBS OF FOOD COMMODITIES _____ _____ _____	\$ <u>14,543,343.</u>	_____
<u>7</u>	LAND BARGAIN PRICE @ 1301 DONELSON PIKE, NASHVILLE TN _____ _____ _____	\$ <u>3,260,000.</u>	<u>09/26/24</u>

Name of organization	Employer identification number
SECOND HARVEST FOOD BANK OF MIDDLE TN, INC.	62-1049447

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	SECOND HARVEST FOOD BANK OF MIDDLE TN, INC.	Employer identification number (EIN)	62-1049447
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures \$

3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$

4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No

5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2024

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table><thead><tr><th>IF the amount on line 1e, column (a) or (b), is:</th><th>THEN the lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>not over \$500,000</td><td>20% of the amount on line 1e.</td></tr><tr><td>over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000.</td></tr><tr><td>over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000.</td></tr><tr><td>over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000.</td></tr><tr><td>over \$17,000,000</td><td>\$1,000,000.</td></tr></tbody></table>	IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.			
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:														
not over \$500,000	20% of the amount on line 1e.														
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2024

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			0.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments, and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LOBBYING ACTIVITIES CONSIST PRIMARILY OF GETTING THE STATE OF TENNESSEE BUDGET AMENDMENT ON THE DOCKET FOR A STATE APPROPRIATION THAT THE FIVE FOOD BANKS ACROSS THE STATE SPLIT.

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization **SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Employer identification number
62-1049447

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$

(ii) Assets included in Form 990, Part X \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) (Rev. 12-2024)

SECOND HARVEST FOOD BANK OF MIDDLE TN,

Schedule D (Form 990) (Rev. 12-2024) INC.

62-1049447 Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	16,639,660.	14,553,146.	13,098,672.		
b Contributions				15,802,398.	
c Net investment earnings, gains, and losses	2,209,722.	2,121,633.	1,502,046.	-2,646,872.	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	40,216.	35,119.	47,572.	56,854.	
g End of year balance	18,809,166.	16,639,660.	14,553,146.	13,098,672.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 100 %

b Permanent endowment %

c Term endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? ☐ Yes ☒ No

(ii) Related organizations? ☐ Yes ☒ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☒ No

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		11,985,491.		11,985,491.
b Buildings		19,710,044.	6,967,708.	12,742,336.
c Leasehold improvements				
d Equipment		8,993,470.	7,354,834.	1,638,636.
e Other		149,887.		149,887.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				26,516,350.

Schedule D (Form 990) (Rev. 12-2024)

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DONATED FOOD INVENTORY	1,644,982.
(2) COMMODITIES INVENTORY	879,862.
(3) OTHER INVENTORY	4,680,880.
(4) ROU LEASE	3,131,510.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	10,337,234.

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITIES	3,175,484.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	3,175,484.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

SECOND HARVEST FOOD BANK OF MIDDLE TN,

Schedule D (Form 990) (Rev. 12-2024) INC.

62-1049447 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	158,812,691.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	2,107,092.
b	Donated services and use of facilities	2b	17,985.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	89,035.
e	Add lines 2a through 2d	2e	2,214,112.
3	Subtract line 2e from line 1	3	156,598,579.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	48,525.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	48,525.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	156,647,104.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	149,964,473.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	17,985.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	366,020.
e	Add lines 2a through 2d	2e	384,005.
3	Subtract line 2e from line 1	3	149,580,468.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	48,525.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	48,525.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	149,628,993.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE ENDOWMENT'S GOAL IS TO GENERATE LONG-TERM GROWTH TO SUPPORT THE CURRENT AND FUTURE SPENDING NEEDS OF THE FOOD BANK.

PART X, LINE 2:

MANAGEMENT PERFORMS AN EVALUATION OF ALL INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE FOOD BANK'S INCOME TAX RETURNS TO DETERMINE WHETHER THE INCOME TAX POSITIONS MEET A "MORE LIKELY THAN NOT" STANDARD OF BEING SUSTAINED UNDER EXAMINATION BY THE APPLICABLE TAXING AUTHORITIES. MANAGEMENT HAS PERFORMED ITS EVALUATION OF ALL INCOME TAX POSITIONS TAKEN ON ALL OPEN INCOME TAX RETURNS AND HAS DETERMINED THAT THERE WERE NO POSITIONS TAKEN THAT DO NOT MEET THE "MORE LIKELY THAN NOT" STANDARD. ACCORDINGLY, THERE ARE NO PROVISIONS FOR INCOME TAXES, PENALTIES OR INTEREST RECEIVABLE OR PAYABLE RELATING TO UNCERTAIN INCOME TAX POSITIONS IN THE ACCOMPANYING FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS 89,035.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSES 366,020.

Schedule D (Form 990) (Rev. 12-2024) **INC.**

Part XIII	Supplemental Information <i>(continued)</i>
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(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number
62-1049447

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

SECOND HARVEST FOOD BANK OF MIDDLE TN,

Schedule G (Form 990) (Rev. 12-2024) **INC.**

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Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 STARS FOR SECOND HARVEST	(b) Event #2 GENEROUS HELPINGS	(c) Other events 5	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	343,698.	113,336.	355,122.	812,156.
	2 Less: Contributions	173,450.	94,436.	272,750.	540,636.
	3 Gross income (line 1 minus line 2)	170,248.	18,900.	82,372.	271,520.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	55,575.	33,476.	7,484.	96,535.
	7 Food and beverages		2,682.	123,369.	126,051.
	8 Entertainment			7,000.	7,000.
	9 Other direct expenses	7,990.	11,716.	116,728.	136,434.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				366,020.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-94,500.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

SECOND HARVEST FOOD BANK OF MIDDLE TN,

Schedule G (Form 990) (Rev. 12-2024) **INC.**

62-1049447 Page **3**

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c If "Yes," enter the name and address of the third party:

Name

Address

- 16** Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: **RKD GROUP, LLC**

(I) ADDRESS OF FUNDRAISER: **PO BOX 9843595, DALLAS, TX 75284**

Part IV	Supplemental Information <i>(continued)</i>
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**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Employer identification number
62-1049447

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
24 CHURCH 1502 SUBSTATION ROAD PLEASANT VIEW, TN 37146		501(C)3	0.	25,200.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
AAOC CHARMS CAMPS 1326 ROSA L. PARKS BLVD NASHVILLE, TN 37208	78-0206760	501(C)3	0.	30,659.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ASSEMBLY LIFE ASSEMBLY OF GOD WINCHESTER - 3310 COWAN HIGHWAY - WINCHESTER, TN 37698		501(C)3	0.	63,719.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ADULT AND TEEN CHALLENGE - CLARKSVILLE - 130 CORPORATE DRIVE - CLARKSVILLE, TN 37040		501(C)3	0.	16,642.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ANCORA TN P.O. BOX 7 NASHVILLE, TN 37080	45-4955577	501(C)3	0.	7,511.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ARK COMMUNITY RESOURCE ASSISTANCE CENTER - 710 HIGHWAY 70 - KINGSTON SPRINGS, TN 37143	06-1640635	501(C)3	0.	113,421.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **290.**

3 Enter total number of other organizations listed in the line 1 table **0.**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (Rev. 12-2024)

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPIRE COLUMBIA/ CENTERSTONE 6011 B TROTWOOD AVENUE COLUMBIA, TN 38401	62-1674308	501(C)3	0.	47,213.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BAXTER SENIOR CENTER 101 ELMORE TOWN ROAD BAXTER, TN 38544	46-3594886	501(C)3	0.	38,829.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BELL ROAD CHURCH OF THE NAZARENE 414 BELL ROAD NASHVILLE, TN 37217	44-0552034	501(C)3	0.	106,588.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BETHEL UNITED METHODIST CHURCH 2475 WOODLAWN ROAD WOODLAWN, TN 37191	31-1813333	501(C)3	0.	65,913.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BETHESDA CENTER 124 S. MAIN STREET ASHLAND CITY, TN 37015	58-2015542	501(C)3	0.	89,687.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BIBLE HILL BAPTIST CHURCH 71 RUSS LONG ROAD PARSONS, TN 38363	62-0535346	501(C)3	0.	9,760.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BIBLICAL CONCEPTS GROUP HOME 711 HARTSVILLE PIKE GALLATIN, TN 37066	26-3053313	501(C)3	0.	15,468.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BIG SANDY CHRISTIAN COMM. OUTREACH 30 FRONT STREET BIG SANDY, TN 38221	81-0705253	501(C)3	0.	165,831.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BON AIR MOUNTAIN COMMUNITY CHURCH 6389 CROSSVILLE HIGHWAY SPARTA, TN 38583	92-3730987	501(C)3	0.	448,499.	FAIR MARKET VALUE	USDA COMMODITIES, REFRIGERATION, AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BONDECROFT BAPTIST CHURCH/GOD'S PANTRY - 8545 CROSSVILLE HIGHWAY - SPARTA, TN 38583	62-0577038	501(C)3	0.	302,999.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BRIDGE MINISTRIES 533 BRICK CHURCH PARK DRIVE NASHVILLE, TN 37207	01-0849577	501(C)3	0.	172,392.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BRIDGE OF HOPE 1575 HIGHWAY 641 S PARIS, TN 38242	23-9016960	501(C)3	0.	77,023.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BUFFALO VALLEY INC 415 SOUTH PARK STREET HOHENWALD, TN 38462	58-1374964	501(C)3	0.	205,134.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BUFFALO VALLEY NASHVILLE 105 OAK VALLEY DRIVE NASHVILLE, TN 37207	10-0116607	501(C)3	0.	29,089.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BUFFALO VALLEY, INC./ CLARKSVILLE 715 CUMBERLAND DRIVE CLARKSVILLE, TN 37040		501(C)3	0.	23,223.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
BUFFALO VALLEY/HOHNWALD WEST 118 KITTRELL STREET HOHNWALD, TN 38462		501(C)3	0.	74,126.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CAMDEN FUMC FOOD MINISTRY 104 N. CHURCH STREET CAMDEN, TN 38320	10-0192427	501(C)3	0.	38,369.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CANVAS COMMUNITY TABLE (GENERAL COUNCIL OF THE ASSEMBLIES OF GOD) - 1936 MCARTHUR DRIVE - MANCHESTER, TN 37349	26-4341918	501(C)3	0.	182,519.	FAIR MARKET VALUE	REFRIGERATION AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARTHAGE CHURCH OF GOD 382 MAIN STREET SOUTH BRUSH CREEK, TN 38547	62-1870586	501(C)3	0.	21,216.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CATHOLIC CHARITIES LOAVES AND FISHES (CATHOLIC CHARITIES OF TENNESSEE, INC.) - 508 MAIN STREET - NASHVILLE, TN 37206	62-0679520	501(C)3	0.	30,021.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CATHOLIC CHARITIES NORTH NASHVILLE 2013 25TH AVENUE N NASHVILLE, TN 37208		501(C)3	0.	118,180.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CATHOLIC CHARITIES PASTORAL CENTER 2806 MCGAVOCK PIKE NASHVILLE, TN 37214	62-0679520	501(C)3	0.	29,713.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CATHOLIC CHARITIES SOUTH NASHVILLE PRC - 2195 NOLENSVILLE PIKE - NASHVILLE, TN 37211	10-0163146	501(C)3	0.	42,234.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CATHOLIC CHARITIES TN SERVES NEIGHBORS COFFEE CO. - 103 SE ATLANTIC STREET - TULLAHOMA, TN 37388	10-0163146	501(C)3	0.	15,873.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CATHOLIC CHARITIES TN SERVES NEIGHBORS MAURY CO. - 1501 HATCHER LANE - COLUMBIA, TN 38401	10-0163146	501(C)3	0.	23,119.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CATHOLIC CHARITIES, TN SERVES NEIGHBORS MONTGOMERY - 523 MADISON STREET - CLARKSVILLE, TN 37040	10-0163146	501(C)3	0.	8,136.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CAYWOOD 162 MONROE AVENUE LEXINGTON, TN 38351	10-0188852	501(C)3	0.	6,487.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CEDARCROFT HOME 202 S. COLLEGE STREET LEBANON, TN 37088	62-1641402	501(C)3	0.	41,044.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CENTRAL CHURCH OF CHRIST 45 N. MAIN STREET SPARTA, TN 38583	10-0184964	501(C)3	0.	7,165.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CHRISTIAN COOPERATIVE MINISTRY 201 MADISON STREET MADISON, TN 37115	58-1502903	501(C)3	0.	257,013.	FAIR MARKET VALUE	USDA COMMODITIES	TO ASSIST IN FEEDING THOSE IN NEED
CHURCH OF THE ADVENT BODY & SOUL FOOD PANTRY - 5042 EDMONDSON PIKE - NASHVILLE, TN 37211	62-6075442	501(C)3	0.	453,084.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CHURCHES OF CHRIST DISASTER RELIEF 410 ALLIED DRIVE NASHVILLE, TN 37211	62-1560072	501(C)3	0.	8,645.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CLARKSVILLE URBAN MINISTRY (UNITED METHODIST URBAN MINISTRIES) - 217 S. 3RD STREET - CLARKSVILLE, TN 37041	62-1294095	501(C)3	0.	434,699.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COLUMBIA SEVENTH DAY ADVENTIST CHURCH - 870 MOORESVILLE PIKE - COLUMBIA, TN 38401		501(C)3	0.	13,119.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COMER HOUSE OF NASHVILLE, LLC 1603 14TH AVENUE N NASHVILLE, TN 37208	61-1717178	501(C)3	0.	13,095.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COMMUNITY ACTION COMMITTEE 216 UNIVERSITY AVENUE SEWANEE, TN 37375		501(C)3	0.	20,123.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY CARE FELLOWSHIP 511 SOUTH 8TH STREET NASHVILLE, TN 37206	31-1813333	501(C)3	0.	19,374.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COMMUNITY CARE MINISTRIES/ THE ATTIC - 302 W. HOGAN STREET - TULLAHOMA, TN 37388		501(C)3	0.	625,324.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COMMUNITY CONNECTION CHURCH 654 HIGHWAY 52 BYPASS W LAFAYETTE, TN 37083	46-1854685	501(C)3	0.	35,699.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COMMUNITY HELP CTR. TROUSDALE 120A MCMURRY BLVD HARTSVILLE, TN 37074	62-1530097	501(C)3	0.	261,503.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COMMUNITY OUTREACH PARTNERSHIP OF BEDFORD COUNTY - 1005 BELMONT AVENUE - SHELBYVILLE, TN 37160	27-1456130	501(C)3	0.	45,854.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
CONNECT US OUTREACH MINISTRY 804 YOUNGS LANE NASHVILLE, TN 37207	26-2551943	501(C)3	0.	23,687.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
COTTAGE COVE 149 ANTIOCH PIKE NASHVILLE, TN 37211	31-1485047	501(C)3	0.	15,555.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
DICKSON COUNTY HELP CENTER 103 WEST COLLEGE STREET DICKSON, TN 37055	62-1075335	501(C)3	0.	947,568.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
DISCOVERY PLACE INC. 1635 SPENCER MILL ROAD BURNS, TN 37029	62-1688708	501(C)3	0.	69,594.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISMAS HOUSE OF NASHVILLE 2424 CHARLOTTE AVENUE NASHVILLE, TN 37203	23-7376100	501(C)3	0.	27,037.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
DREAM STREETS 520 39TH AVENUE N NASHVILLE, TN 37209	81-4064177	501(C)3	0.	884,859.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
EAGLE'S NEST TRANSITIONAL LIVING, INC. - 1131 DELMAS AVENUE - NASHVILLE, TN 37216	32-0196246	501(C)3	0.	26,678.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
EAST NASHVILLE CO-OP 3115 GALLATIN PIKE NASHVILLE, TN 37216		501(C)3	0.	367,629.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ELEVATE MADISON MINISTRIES 719 GALLTIN PIKE S MADISON, TN 37115		501(C)3	0.	35,158.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FAITHWORKS / FIRST UNITED METHODIST CHURCH - 202 S. MAIN STREET - MT. PLEASANT, TN 38474	31-1813333	501(C)3	0.	5,904.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FAMILIES IN CRISIS INC. 706 S. CHANCERY STREET MCMINNVILLE, TN 37111	62-1448190	501(C)3	0.	22,879.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FAMILY OUTREACH MINISTRIES 30 CROSSLAND AVE STE 206B CLARKSVILLE, TN 37040	47-1853361	501(C)3	0.	107,281.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FEED AMERICA FIRST 319 MURFREESBORO STREET MURFREESBORO, TN 37127	62-1821057	501(C)3	0.	2,480,511.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEED SUMNER FOOD BANK 1121 GREGORY DRIVE GALLATIN, TN 37066	88-0821553	501(C)3	0.	490,889.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FOOD PANTRY OF WAYNE COUNTY 114 JONES LANE WAYNESBORO, TN 38485		501(C)3	0.	5,100.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST BAPTIST CHURCH OF MANCHESTER 1006 HILLSBORO BLVD MANCHESTER, TN 37355	10-0163940	501(C)3	0.	137,208.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST BAPTIST CHURCH OF PARIS 313 NORTH POPLAR STREET PARIS, TN 38242	34-0298752	501(C)3	0.	32,547.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST BAPTIST CHURCH/ LOVE THY NEIGHBOR PANTRY - 708 E. MAIN STREET - LIVINGSTON, TN 38570		501(C)3	0.	66,182.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST CHRISTIAN CHURCH/CLARKSVILLE 516 MADISON STREET CLARKSVILLE, TN 37040		501(C)3	0.	15,289.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST CHRISTIAN CHURCH TULLAHOMA 120 W. GRUNDY STREET TULLAHOMA, TN 37388		501(C)3	0.	102,518.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST COMMUNITY CHURCH - HEALING MINDS AND SOULS - 1813 KNOWLES STREET - NASHVILLE, TN 37208	87-4151228	501(C)3	0.	29,863.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST PENTECOSTAL CHURCH OF LEXINGTON - 9491 HWY 412W - LEXINGTON, TN 38351	44-0612817	501(C)3	0.	162,975.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST SEVENTH DAY ADVENTIST / SHELBYVILLE - 101 CHURCH STREET - SHELBYVILLE, TN 37160	52-0643036	501(C)3	0.	36,828.	FAIR MARKET VALUE	USDA COMMODITIES, REFRIGERATION, AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST SEVENTH DAY ADVENTIST/SPRINGFIELD - 3263 TOM AUSTIN HIGHWAY - SPRINGFIELD, TN 37172	76-7491072	501(C)3	0.	46,711.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST STREET MISSIONARY BAPTIST CHURCH - 1026 MONTGOMERY AVENUE - NASHVILLE, TN 37207	62-1426922	501(C)3	0.	15,650.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST UMC PULASKI 1008 MILL STREET PULASKI, TN 38478	31-1813333	501(C)3	0.	10,642.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FIRST UNITED METHODIST CHURCH 165 EAST BROAD STREET COOKEVILLE, TN 38501		501(C)3	0.	225,952.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FRANKLIN COUNTY SENIOR CENTER 74 CLOVER DRIVE WINCHESTER, TN 37398	23-7444658	501(C)3	0.	138,755.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FREEMAN RECOVERY 250 STATE STREET DICKSON, TN 37055	26-1867691	501(C)3	0.	56,177.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FRIENDSHIP COMMUNITY CHURCH 15285 LEBANON RD OLD HICKORY, TN 37138		501(C)3	0.	98,727.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
FT. DONELSON MEMORIAL UMC/DIXIE GORHAM UMW - 424 CHURCH STREET - DOVER, TN 37058		501(C)3	0.	176,048.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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FT. DONELSON PENTECOSTAL CHURCH OF GOD - 152 WYNNS FERRY RD - DOVER, TN 37058	36-2167731	501(C)3	0.	78,430.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GALLATIN C.A.R.E.S 330 N DURHAM ROAD GALLATIN, TN 37066	62-1179969	501(C)3	0.	556,891.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GATEWAY CHURCH / FEED ONE MINISTRY (CHURCH OF GOD) - 1250 MADISON STREET - SHELBYVILLE, TN 37160	62-0484177	501(C)3	0.	2,163,465.	FAIR MARKET VALUE	REFRIGERATION AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GATHERING PLACE CHURCH - GRACE TEMPLE ASSEMBLY OF GOD - 2100 MORRISON STREET - MCMINNVILLE, TN 37110	44-0577787	501(C)3	0.	528,146.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GILES COUNTY HELP CENTER 314 NORTH 1ST STREET PULASKI, TN 38478	62-1463920	501(C)3	0.	96,481.	FAIR MARKET VALUE	REFRIGERATION, SUPPLIES AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GOD'S STOREHOUSE / PULASKI 947 EAST COLLEGE STREET PULASKI, TN 38478	46-1869765	501(C)3	0.	321,207.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GOD'S STOREHOUSE / LAWRENCEBERG 425 FRANK STREET LAWRENCEBERG, TN 38464	41-2108736	501(C)3	0.	533,921.	FAIR MARKET VALUE	REFRIGERATION AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GOOD SAMARITAN/MANCHESTER 5125 MAIN STREET MANCHESTER, TN 37355		501(C)3	0.	385,377.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GOOD SAMARITAN/TULLAHOMA 210 E. GRUNDY STREET TULLAHOMA, TN 37388		501(C)3	0.	69,591.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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GOOD SHEPHERD METHODIST CHURCH 525 NEW SHACKLE ISLAND ROAD HENDERSONVILLE, TN 37075	31-1813333	501(C)3	0.	17,366.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GRACEWORKS MINISTRIES, INC. 104 SOUTHEAST PARKWAY FRANKLIN, TN 37064	62-1584204	501(C)3	0.	1,579,070.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GREATER FAITH COMMUNITY CHURCH 205 WEAVER STREET TULLAHOMA, TN 37388	83-0625985	501(C)3	0.	116,365.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
GREENHOUSE MINISTRIES 309 S. SPRING STREET MURFREESBORO, TN 37130	62-1802432	501(C)3	0.	98,946.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HAMPSHIRE FIRST BAPTIST CHURCH 4063 HAMPSHIRE PK HAMPSHIRE, TN 38461		501(C)3	0.	157,442.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HANDS OF HOPE 101 C. SOUTH RUSSEL STREET PORTLAND, TN 37148	84-4347371	501(C)3	0.	332,361.	FAIR MARKET VALUE	SUPPLIES AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HANDS OF MERCY OUTREACH CENTER, INC. - 101 EASY STREET - FAYETTEVILLE, TN 37334	46-1655071	501(C)3	0.	546,993.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HARDIN COUNTY CAM PANTRY 230 EUREKA STREET SAVANNAH, TN 38372		501(C)3	0.	173,579.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HELPING HAND OF HUMBOLDT 810 NORTH 22ND AVENUE HUMBOLDT, TN 38343	58-1556492	501(C)3	0.	349,621.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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HELPING HANDS OF HICKMAN COUNTY 10515 LIGON LOVE ROAD BON AQUA, TN 37025	20-3558685	501(C)3	0.	934,280.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HELPING HANDS OF HUMPHREYS COUNTY, INC. - 912 W. MAIN STREET - WAVERLY, TN 37185	78-0217052	501(C)3	0.	9,249.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HELPING HANDS OF WARREN COUNTY 220 EAST MAIN STREET MCMINNVILLE, TN 37110		501(C)3	0.	188,770.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HENDERSON COMMUNITY SOUP KITCHEN 504 EAST MAIN STREET HENDERSONVILLE, TN 38340		501(C)3	0.	17,421.	FAIR MARKET VALUE	REFRIGERATION, SUPPLIES AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HENDERSONVILLE SAMARITAN 116 DUNN STREET HENDERSONVILLE, TN 37075	62-1586362	501(C)3	0.	24,297.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HERMITAGE HILLS BAPTIST / RADICAL HEART - 3475 LEBANON PIKE - HERMITAGE, TN 37076	62-0577038	501(C)3	0.	296,043.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HERMITAGE UNITED METHODIST CHURCH 4250 ANDREW JACKSON PIKE HERMITAGE, TN 37076		501(C)3	0.	253,518.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HICKMAN CARES 123 CHURCH STREET CENTERVILLE, TN 37033		501(C)3	0.	77,385.	FAIR MARKET VALUE	SUPPLIES AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HIGHLAND HEIGHTS CHURCH OF CHRIST 785 SOUTH LOWREY STREET SMYRNA, TN 37167		501(C)3	0.	273,821.	FAIR MARKET VALUE	REFRIGERATION AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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HILLCREST UMC 5112 RAYWOOD LANE NASHVILLE, TN 37211		501(C)3	0.	70,356.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOLLADAY FAMILY BLESSINGS 175 STOKES ROAD HOLLADAY, TN 38341	78-0293916	501(C)3	0.	30,913.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOPE CENTER MINISTRIES - CAMDEN 300 LITTLE HOUSE ROAD CAMDEN, TN 38320	35-6174080	501(C)3	0.	35,644.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOPE CENTER MINISTRIES - DICKSON MEN - 167 WOODY CLOSE - DICKSON, TN 37055	20-8934436	501(C)3	0.	11,210.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOPE CENTER MINISTRIES - DICKSON WOMENS - 1345 COWAN ROAD - DICKSON, TN 37055		501(C)3	0.	14,816.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOPE CENTER MINISTRIES, MCEWEN 4551 E. BLUE CREEK ROAD MCEWEN, TN 37101	78-0240035	501(C)3	0.	59,348.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOPE CENTER MINISTRIES, WAVERLY 1000 HOPE LANE WAVERLY, TN 37185		501(C)3	0.	44,026.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOPE FOOD PANTRY 212 PORTLAND ROAD WHITE HOUSE, TN 37188		501(C)3	0.	29,911.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOPE HOHENWALD 243 FORREST AVENUE / 217 N PARK ST HOHENWALD, TN 38462	82-5145566	501(C)3	0.	3,138,380.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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HOPE MINISTRIES 169 HOLLY STREET LEXINGTON, TN 38351		501(C)3	0.	32,255.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOUSE OF PRAYER CHRISTIAN CHURCH 1001 DOTSONVILLE ROAD CLARKSVILLE, TN 37042	27-0023914	501(C)3	0.	62,431.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HOWELL CHURCH OF CHRIST 11 OLD SCHOOLHOUSE ROAD PETERSBURG, TN 37144		501(C)3	0.	60,122.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
HUNTINGDON CHURCH OF CHRIST 18900 WEST MAIN STREET HUNTINGDON, TN 38344		501(C)3	0.	42,178.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
IMMANUEL BAPTIST CHURCH 220 WILDWOOD AVENUE LEBANON, TN 37087		501(C)3	0.	80,074.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
INGLEWOOD BAPTIST CHURCH 3901 GALLATIN ROAD NASHVILLE, TN 37216		501(C)3	0.	21,017.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
INGLEWOOD CHURCH OF NAZARENE 3936 GALLATIN PIKE NASHVILLE, TN 37216	44-0552034	501(C)3	0.	21,686.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
INSPIRITUS 1628 ROSA L. PARKS NASHVILLE, TN 37208	58-1535692	501(C)3	0.	93,938.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
JACKSON HALL RESIDENT PROG/CENTERSTONE - 2122 CIRCLE DRIVE - COLUMBIA, TN 38401		501(C)3	0.	33,780.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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JOSEPH STOREHOUSE (WEST) 538 BARREN HOLLOW RD HURRICANE MILLS, TN 37078	03-0504672	501(C)3	0.	762,223.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
JOURNEY COMMUNITY CHURCH 916 DINAH SHORE BLVD WINCHESTER, TN 37398	62-1563144	501(C)3	0.	184,251.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
JUST HOPE, INC 250 MCMURRAY BLVD HURRICANE MILLS, TN 37078		501(C)3	0.	50,408.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
KIDS OF THE COMMUNITY 681 CADILLAC LANE MCMINNVILLE, TN 37110	02-0660021	501(C)3	0.	18,677.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
KINGDOM LIVING OUTREACH MINISTRIES 1307 FORT CAMPBELL BLVD CLARKSVILLE, TN 37040		501(C)3	0.	144,070.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
KING'S DAUGHTERS SCHOOL OF MAURY COUNTY TENNESSEE - 412 WEST 9TH STREET - COLUMBIA, TN 38401	62-0560293	501(C)3	0.	15,374.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LADIES OF CHARITY WELFARE 2212 STATE STREET NASHVILLE, TN 37203	62-0481799	501(C)3	0.	117,593.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LAFAYETTE UNITED METHODIST CHURCH 506 BRATTON AVENUE LAFAYETTE, TN 37083		501(C)3	0.	70,628.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LASCASSAS UNITED METHODIST CHURCH 4665 EAST JEFFERSON PIKE LASCASSAS, TN 37085		501(C)3	0.	391,801.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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LAVERGNE CHURCH OF CHRIST 244 OLD NASHVILLE HIGHWAY LAVERGNE, TN 37086		501(C)3	0.	11,033.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LAVERGNE FIRST UNITED METHODIST CHURCH - 248 WALDRON ROAD - LAVERGNE, TN 37086		501(C)3	0.	69,857.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LEOMA BAPTIST CHURCH 6 DOUN LEOMA ROAD LEOMA, TN 38468	62-0577038	501(C)3	0.	11,813.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LIFESONG MINISTRIES 1041 S. ELLINGTON PARKWAY LEWISBURG, TN 37091	62-1859120	501(C)3	0.	340,212.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LIGHTHOUSE CHRISTIAN CAMP 205 SERENITY PLACE SMITHVILLE, TN 37166	62-1198317	501(C)3	0.	102,574.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LIMESTONE BAPTIST CHURCH 1613 WEST MAIN STREET FRANKLIN, TN 37064	37-1462595	501(C)3	0.	154,827.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LIVING HOPE CHURCH 1020 EAST SPRING STREET COOKEVILLE, TN 38503	62-1651245	501(C)3	0.	140,362.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LOAVES AND FISHES - CLARKSVILLE 825 CROSSLAND AVE CLARKSVILLE, TN 37040	62-1692703	501(C)3	0.	46,424.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
LOVE ONE ANOTHER EMBASSY, INC. / JOSEPH'S STOREHOUSE FOOD MINISTRY - 1960 SE TATER PEELER RD - LEBANON, TN 37090	64-1641617	501(C)3	0.	995,704.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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LOVING CARE MINISTRY 973 KITTRELL HALLS HILL ROAD READYVILLE, TN 37149		501(C)3	0.	79,825.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MACON HELPS 111 MAIN STREET LAFAYETTE, TN 37083	62-1500589	501(C)3	0.	984,022.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MADISON CHURCH OF CHRIST BENEVOLENCE CENTER - 106 NORTH GALLATIN ROAD - MADISON, TN 37115	62-0630112	501(C)3	0.	1,050,970.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MANNA CAF MINISTIRES 605 PROVIDENCE BLVD CLARKSVILLE, TN 37042	27-1699146	501(C)3	0.	1,899,177.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MANNA CAFE STEWART COUNTY 605 PROVIDENCE BLVD CLARKSVILLE, TN 37042	27-1699146	501(C)3	0.	138,391.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MARTHA O'BRYAN CENTER 711 S 7TH STREET NASHVILLE, TN 37206	62-0477728	501(C)3	0.	681,269.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MEHARRY MEDICAL COLLEGE 1810 ALBION STREET NASHVILLE, TN 37208	62-0488046	501(C)3	0.	11,263.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MIDLAND BAPTIST CHURCH / JOURNEY OF HOPE - 3114 MIDLAND FOSTERVILLE RD - BELL BUCKLE, TN 37020		501(C)3	0.	1,159,553.	FAIR MARKET VALUE	USDA COMMODITIES, REFRIGERATION, AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MINISTRIES OF HOPE 808 S ANDERSON STRET TULLAHOMA, TN 37388	46-5700503	501(C)3	0.	31,551.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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MISSION 615 1041 CENTER POINT ROAD HENDERSONVILLE, TN 37075	47-2736368	501(C)3	0.	50,558.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MISSIONARY GROVE BAPTIST 165 MISSIONARY GROVE ROAD CAMDEN, TN 38320		501(C)3	0.	1,228,030.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MONTEREY FOOD PANTRY 400 WEST CRAWFORD MONTEREY, TN 38574	27-2987330	501(C)3	0.	47,771.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MONTEREY MISSION CENTER 315 E. PETERS AVENUE PUTNAM, TN 38574	62-0577038	501(C)3	0.	108,744.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MOORE COUNTY RESOURCE CENTER 241 MAIN STREET LYNCHBURG, TN 37352	82-1492336	501(C)3	0.	78,287.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MT. CARMEL BAPTIST CHURCH 4011 NASHVILLE HIGHWAY LEWISBURG, TN 37091	10-0046095	501(C)3	0.	68,420.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MT JULIET HELP CENTER 3425 N MOUNT JULIET ROAD MT JULIET, TN 37122	62-1217515	501(C)3	0.	245,219.	FAIR MARKET VALUE	REFRIGERATION AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MT. ZION UNITED METHODIST CHURCH 5875 HIGHWAY 40 CUNNINGHAM, TN 37052		501(C)3	0.	274,119.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
MURFREESBORO SEVENTH DAY ADVENTIST CHURCH - 2815 ELAM ROAD - MURFREESBORO, TN 37127		501(C)3	0.	182,659.	FAIR MARKET VALUE	SUPPLIES AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSTARD SEED RANCH 4725 KUYKENDALL ROAD COOKEVILLE, TN 38501	20-5349572	501(C)3	0.	244,772.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NASHVILLE BURRITO MINISTRY 2501 YORK ROAD NASHVILLE, TN 37135	62-1841762	501(C)3	0.	5,352.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NASHVILLE DREAM CENTER 3688 HIGHWAY 109 NORTH LEBANON, TN 37087	20-3065115	501(C)3	0.	104,145.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NASHVILLE GENERAL HOSPITAL FOUNDATION - 1818 ALBION ST. - NASHVILLE, TN 37208	62-1383977	501(C)3	0.	19,910.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NASHVILLE RESCUE MISSION 639 LAFAYETTE STREET NASHVILLE, TN 37203	45-2424130	501(C)3	0.	690,310.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NASHVILLE RESCUE MISSION WOMEN CENTER - 1716 ROSA L. PARKS BLVD - NASHVILLE, TN 37208	45-2424130	501(C)3	0.	215,636.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEIGHBORS CONCERNED / HARVEST SHARE - 419 W. 9TH STREET - COLUMBIA, TN 38402	62-1124838	501(C)3	0.	364,425.	FAIR MARKET VALUE	USDA COMMODITIES, REFRIGERATION, AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEW BEGINNING FELLOWSHIP CHURCH 775 WEST CEMETARY ROAD COOKEVILLE, TN 38506	78-0057341	501(C)3	0.	42,385.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEW BEGINNINGS MINISTRY 8125 HIGHWAY 69 A BIG SANDY, TN 38221		501(C)3	0.	249,073.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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NEW BETHLEHEM BAPTIST CHURCH 161 NEW BETHLEHEM ROAD DYER, TN 38330	10-0193837	501(C)3	0.	30,495.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEW GARDEN CHURCH 4636 LEBANON PIKE HERMITAGE, TN 37076	62-0932793	501(C)3	0.	121,708.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEW HARMONY BAPTIST CHURCH 7050 HIGHWAY 69 SOUTH PARIS, TN 38242		501(C)3	0.	220,879.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEW HOPE BAPTIST CHURCH 6010 NEW HOPE ROAD HERMITAGE, TN 37067		501(C)3	0.	178,242.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEW SONG BAPTIST CHURCH 2585 ZION ROAD COLUMBIA, TN 38401	62-0577038	501(C)3	0.	40,329.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NEW VISION MINISTRIES 3012 THOMPSON LANE WESTMORELAND, TN 37186		501(C)3	0.	264,104.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NO POTENTIAL LEFT BEHIND 309 A LOVELL STREET MADISON, TN 37115	32-0393594	501(C)3	0.	45,015.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NOLENSVILLE FOOD PANTRY @ PROVIDENCE BAPTIST - 1668 SUNSET ROAD - BRENTWOOD, TN 37027	99-2275456	501(C)3	0.	160,245.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NORTHFIELD CHURCH 2100 NASHVILLE PIKE GALLATIN, TN 37066		501(C)3	0.	79,009.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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NOURISH 1809 MEMORIAL BLVD MURFREESBORO, TN 37129	58-1565567	501(C)3	0.	1,153,010.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
NOURISH FOOD BANK - SOUTH NASHVILLE - 416 E. THOMPSON LANE - NASHVILLE, TN 37211	58-1565567	501(C)3	0.	592,879.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
OLIVET MISSIONARY BAPTIST 144 EWING DRIVE NASHVILLE, TN 37207	62-0577038	501(C)3	0.	15,564.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ONE GENERATION AWAY 320 PREMIER CT FRANKLIN, TN 37067	46-2741214	501(C)3	0.	4,532,050.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
OPERATION STAND DOWN 1125 12TH AVENUE S NASHVILLE, TN 37203	62-1638832	501(C)3	0.	14,983.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
OUR DAILY BREAD FOOD PANTRY 1180 WAYNE RD SAVANNAH, TN 38372	27-3220201	501(C)3	0.	483,228.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
OUTREACH MINISTRIES INTERNATIONAL 101 SCENIC VIEW RD OLD HICKORY, TN 37138		501(C)3	0.	53,544.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PARIS-FIRST UNITED METHODIST CHURCH - 101 EAST BLYTHE ST - PARIS, TN 38242	31-1813333	501(C)3	0.	311,043.	FAIR MARKET VALUE	SUPPLIES AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PATHFINDERS / BUFFALO VALLEY 885 HIGHWAY 231 SOUTH CASTALIAN SPRINGS, TN 37031		501(C)3	0.	166,972.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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PEOPLE LOVING NASHVILLE 3511 GALLATIN PIKE STE 105 NASHVILLE, TN 37216	27-3589196	501(C)3	0.	53,156.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PERRY CO FOOD BANK PLUS 111 BROOKLYN AVENUE LINDEN, TN 37096		501(C)3	0.	352,437.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PISTOLE BAPTIST CHURCH 1501 PISTOLE ROAD SPARTA, TN 38583	62-0535346	501(C)3	0.	105,872.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PLEASANT GREEN BAPTIST CHURCH 1410 JEFFERSON STREET NASHVILLE, TN 37208		501(C)3	0.	8,797.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PLEASANT HEIGHTS BAPTIST CHURCH 2712 TROTWOOD AVENUE COLUMBIA, TN 38401	62-0696151	501(C)3	0.	45,496.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PLEASANT HILL METHODIST CHURCH 130 PLEASANT HILL RD PLEASANT VIEW, TN 37146		501(C)3	0.	8,414.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PLEASANT VIEW UMC 2621 CHURCH STREET PLEASANT VIEW, TN 37146	59-5325184	501(C)3	0.	13,089.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PORTLAND PAY IT FORWARD 201 COLLEGE STREET PORTLAND, TN 37148	84-4163564	501(C)3	0.	193,235.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PRESTON TAYLOR MINISTRIES- WILSON CENTER - 4014 INDIANA AVENUE - NASHVILLE, TN 37209	62-1757018	501(C)3	0.	21,164.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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PROJECT RETURN 109 LAFAYETTE STREET NASHVILLE, TN 37210	62-1058325	501(C)3	0.	15,211.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PROVISIONS MINISTRIES FOUNDRY 1419 CLINTON STREET NASHVILLE, TN 37203	62-1532199	501(C)3	0.	37,844.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PUTNAM COUNTY/HELPING HANDS 421 EAST BROAD STREET COOKEVILLE, TN 38501		501(C)3	0.	298,444.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
PUTNAM EDUCATION PARTNERSHIP FOUNDATION - 1400 EAST SPRING STREET - COOKEVILLE, TN 38506		501(C)3	0.	13,099.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RADICAL MISSION COMPASSIONATE MINISTRIES - 150 RICHVIEW ROAD - CLARKSVILLE, TN 37043	20-1630209	501(C)3	0.	105,934.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RECONNECT CLARKSVILLE/CENTERSTONE 611 8TH STREET CLARKSVILLE, TN 37040		501(C)3	0.	44,661.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RECONNECT COLUMBIA/CENTERSTONE 6011 A TROTWOOD AVE COLUMBIA, TN 38401		501(C)3	0.	24,071.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RECONNECT SHELBYVILLE/CENTERSTONE 1110 WOODBURY STREET SHELBYVILLE, TN 37160		501(C)3	0.	27,923.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RECONNECT/TULLAHOMA/CENTERSTONE 709 NORTH DAVIDSON STREET TULLAHOMA, TN 37388		501(C)3	0.	8,630.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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REFUGE CHURCH NASHVILLE 309 RAYON DRIVE NASHVILLE, TN 37138		501(C)3	0.	69,610.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RESCUE 1 GLOBAL 2416 PLUM STREET NASHVILLE, TN 37207	46-3971862	501(C)3	0.	7,904.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RESTORING HOPE 7310 BAXTER ROAD BAXTER, TN 38544	30-0819576	501(C)3	0.	404,671.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RIVER LAKE BAPTIST CHURCH 4560 HIGHWAY 70 WEST WAVERLY, TN 37185		501(C)3	0.	38,079.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ROOM IN THE INN 705 DREXEL STREET NASHVILLE, TN 37203	62-0811413	501(C)3	0.	48,791.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
RURAL HILL CHURCH OF CHRIST 564 BELL ROAD ANTIOCH, TN 37013		501(C)3	0.	22,977.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SACKS THRIFT AVE-FIRST UPC OF GREENFIELD - 2161 NORTH MERIDIAN STREET - GREENFIELD, TN 38230	43-0679185	501(C)3	0.	10,124.	FAIR MARKET VALUE	REFRIGERATION AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SAFE ENTRY HOUSING 483 MYATT DRIVE NASHVILLE, TN 37155		501(C)3	0.	7,079.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SAFE HARBOR OF BUCKSNORT 5032 HIGHWAY 230 W ONLY, TN 37140	58-1710683	501(C)3	0.	262,072.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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SAFE HAVEN CHEATHAM PO BOX 246 ASHLAND CITY, TN 37015		501(C)3	0.	5,077.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SALEM BAPTIST CHURCH 199 NEAL KINSEY ROAD TRENTON, TN 38382		501(C)3	0.	32,272.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SALT FOOD PANTRY 7019 HICKORY RIDGE ROAD LEBANON, TN 37090	99-1027322	501(C)3	0.	215,932.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SALVATION ARMY 1137 W MAIN MURFREESBORO, TN 37129	58-0660607	501(C)3	0.	8,653.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SAMARITAN MINISTRIES OF TEMPLE BAPTIST CHURCH - 1041 28TH AVENUE NORTH - NASHVILLE, TN 37208	62-1341004	501(C)3	0.	91,429.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SAMARITAN RECOVERY COMMUNITY 319 SOUTH 4TH STREET NASHVILLE, TN 37206	62-0723592	501(C)3	0.	53,796.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SANDRIDGE BAPTIST CHURCH 7350 HIGHWAY 12 WEST LEXINGTON, TN 38351		501(C)3	0.	138,071.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SARDIS RIDGE BAPTIST CHURCH 1335 SARDIS RIDGE ROAD PARSONS, TN 38363	62-0535346	501(C)3	0.	5,816.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SAVANNAH HOUSE OF HOPE 1225 PICKWICK STREET SAVANNAH, TN 38372		501(C)3	0.	26,885.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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SILVER POINT BAPTIST CHURCH 4047 HUNTGONTON DRIVE COOKEVILLE, TN 38501		501(C)3	0.	31,854.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SMITHVILLE CUMBERLAND PRESBYTERIAN CHURCH - 201 S. COLLEGE STREET - SMITHVILLE, TN 37166		501(C)3	0.	274,090.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SMITHVILLE UNITED METHODIST CHURCH 430 EAST BROAD STREET SMITHVILLE, TN 37166		501(C)3	0.	242,232.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SMYRNA CHURCH OF CHRIST 205 FRONT STREET SMYRNA, TN 37167		501(C)3	0.	8,401.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SMYRNA FIRST UNITED METHODIST CHURCH - 301 SAM DAVIS ROAD - SMYRNA, TN 37167		501(C)3	0.	16,617.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SOUTH LAWRENCE FOOD CTR 723 W MILITARY STREET LORETTO, TN 38469	62-0535346	501(C)3	0.	72,966.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SPARTA WHITE COUNTY HELP CENTER 20 NORTH MAIN STREET SPARTA, TN 38583	47-2092859	501(C)3	0.	354,485.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SPRING CREEK BAPTIST CHURCH 2760 TRENTON ROAD CLARKSVILLE, TN 37040	62-0535346	501(C)3	0.	44,733.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ST. ANDREW CATHOLIC CHURCH 829 VALLEY VIEW DRIVE SPARTA, TN 38583		501(C)3	0.	139,886.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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ST. LUKE'S PRIMITIVE BAPTIST CHURCH - 135 LEWIS STREET - NASHVILLE, TN 37210		501(C)3	0.	7,952.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ST. LUKE'S COMMUNITY HOUSE 5601 NEW YORK AVENUE NASHVILLE, TN 37209		501(C)3	0.	556,683.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ST. LUKE'S FOOD PANTRY 10682 OLD NASHVILLE HWY SMYRNA, TN 37167		501(C)3	0.	9,864.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ST. MINA COPTIC ORTHODOX CHURCH 476 MCMURRAY DRIVE NASHVILLE, TN 37211	01-0907778	501(C)3	0.	108,182.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ST. PHILIP'S EPISCOPAL CHURCH 85 FAIRWAY DRIVE NASHVILLE, TN 37214	62-6075442	501(C)3	0.	40,607.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ST. VINCENT DE PAUL-ST. PATRICK CHURCH - 1700 HEIMAN STREET - NASHVILLE, TN 37208	53-0196617	501(C)3	0.	86,835.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
ST. PAUL MISSIONARY BAPTIST CHURCH 66 BEACON ROAD DECATURVILLE, TN 38329		501(C)3	0.	17,643.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
STAR MINISTRIES, INC. 1307 LEWIS STREET NASHVILLE, TN 37210	62-1651528	501(C)3	0.	173,345.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
STEVENS STREET BAPTIST CHURCH CARE CENTER - 327 W STEVENS STREET - COOKEVILLE, TN 38501		501(C)3	0.	118,290.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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STEWART COUNTY SENIORS/DOVER 111 GENERAL RICE STREET DOVER, TN 37058	62-1048733	501(C)3	0.	16,095.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
STREET WORKS 1326 ROSA L PARKS NASHVILLE, TN 37208	62-1806967	501(C)3	0.	11,489.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
SUMNER COUNTY MISSIONS 724 EAST MAIN STREET HENDERSONVILLE, TN 37075		501(C)3	0.	55,218.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TAFT FULL GOSPEL FOOD BANK 1129 OLD RAILROAD BED RD TAFT, TN 38488		501(C)3	0.	6,089.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TEEN CHALLENGE SAVANNAH 1450 FLORENCE ROAD SAVANNAH, TN 38372	62-1865658	501(C)3	0.	85,983.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TEMPLE BAPTIST CHURCH 3720 KINGS LANE NASHVILLE, TN 37218	62-1179598	501(C)3	0.	60,140.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TEMPLE OF PRAISE 1030 RAGSDALE LANE PULASKI, TN 38478	62-1618576	501(C)3	0.	122,316.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE ARK COMMUNITY RESOURCE ASSISTANCE CENTER - 710 HIGHWAY 70 - KINGSTON SPRINGS, TN 37143		501(C)3	0.	7,849.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE ATTIC / COMMUNITY CARE MINISTRIES - 302 W. HOGAN STREET - TULLAHOA, TN 37388		501(C)3	0.	9,578.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BRANCH OF NASHVILLE, INC. 41 TUSCULUM ROAD ANTIOCH, TN 37013	46-3153789	501(C)3	0.	2,179,494.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE FAMILY CENTER (SOUTH CENTRAL TENNESSEE EXCHANGE CLUB FAMILY CENTER, INC.) - 921 SOUTH BECKETT STREET - COLUMBIA, TN 38401	62-1597122	501(C)3	0.	406,894.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE HELP CENTER 213 W. MAPLEWOOD LANE NASHVILLE, TN 37207	47-2594358	501(C)3	0.	687,232.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE JOURNEY HOME 308 WEST CASTLE STREET MURFREESBORO, TN 37129		501(C)3	0.	42,115.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE MILAN MUSTARD SEED, INC. 2027 SECOND STREET MILAN, TN 38358	62-1224019	501(C)3	0.	477,542.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE NASHVILLE FOOD PROJECT 5904 CALIFORNIA AVENUE NASHVILLE, TN 37209	45-2905951	501(C)3	0.	394,569.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE STORE, INC. 2009 12TH AVENUE SOUTH NASHVILLE, TN 37204	81-4247568	501(C)3	0.	102,273.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE STOREHOUSE FOOD PANTRY 607 HICKERSON STREET MANCHESTER, TN 37355		501(C)3	0.	215,432.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
THE WELL 5306 MAIN STREET SPRING HILL, TN 37174	32-0258525	501(C)3	0.	1,722,459.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED

Schedule I (Form 990)

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule I (Form 990)

62-1049447

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE WELL - MT. PLEASANT 700 NORTH MAIN STREET MT. PLEASANT, TN 38474		501(C)3	0.	520,466.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TNKIDS NUTRITION, INC. 1006 PEPPER STREET SPRINGFIELD, TN 37172	27-2268298	501(C)3	0.	95,262.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TONY RICE CENTER 1300 RAIROAD AVENUE SHELBYVILLE, TN 37160	62-1461852	501(C)3	0.	37,199.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TREVECCA COMMUNITY CHURCH 335 MURFREESBORO ROAD NASHVILLE, TN 37210	44-0552034	501(C)3	0.	74,346.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TREZEVANT MINISTERIAL ALLIANCE PANTRY - 5365 MAIN STREET WEST - TREZEVANT, TN 38258		501(C)3	0.	11,333.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
TULLAHOMA FIRST METHODIST CHURCH 201 WEST LINCOLN STREET TULLAHOMA, TN 37388		501(C)3	0.	176,184.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
UCHRA/CHANCE RESIDENTIAL 1744 DERRYBERRY ROAD BLOOMINGTON SPRINGS, TN 38545		501(C)3	0.	15,858.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
UNITED MINISTRIES 808 SOUTH MAIN STREET SPRINGFIELD, TN 37172		501(C)3	0.	836,282.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
UNLIMITED POTENTIAL COMMUNITY DEVELOPMENT CORP - 290 E WINCHESTER STREET - GALLATIN, TN 37066		501(C)3	0.	38,067.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

Schedule I (Form 990)

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VICTORY CHRISTIAN CENTER-SHALOM FOOD MINISTRY - 1641 MIDDLE TENNESSEE BLVD - MURFREESBORO, TN 37130	62-1606516	501(C)3	0.	5,857.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
VILLA MARIA MANOR 32 WHITEBRIDGE ROAD NASHVILLE, TN 37205		501(C)3	0.	12,774.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
VINE RIDGE BAPTIST / 5 LOAVES 602 VINE RIDGE ROAD CRAWFORD, TN 38554		501(C)3	0.	58,890.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
VOICE OF VICTORY 127 CAMPBELLSVILLE PIKE ETHRIDGE, TN 38456	83-3834729	501(C)3	0.	400,349.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
VOICES OF SAVANNAH 212 EUREKA STREET MILAN, TN 38358		501(C)3	0.	128,990.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WARREN CO. SCHOOLS 200 CALDWELL STREET MCMINNVILLE, TN 37110		501(C)3	0.	6,584.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WATSON GROVE MISSIONARY BAPTIST CHURCH - 1415 HORTON AVENUE - NASHVILLE, TN 37212		501(C)3	0.	58,875.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WAYNESBORO MINISTERIAL ASSOCIATION 210 S MAIN STREET WAYNESBORO, TN 38485	62-0577038	501(C)3	0.	120,918.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WE CARE MINISTRIES 530 N. LINDELL STREET MARTIN, TN 38237	62-1292937	501(C)3	0.	34,227.	FAIR MARKET VALUE	REFRIGERATION AND FOOD	TO ASSIST IN FEEDING THOSE IN NEED

Schedule I (Form 990)

**SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Schedule I (Form 990)

62-1049447

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEAKLEY COUNTY BACKPACK PROGRAM 265 SOUTH PARKWAY DRESDEN, TN 38225		501(C)3	0.	21,763.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WELCOME HOME MINISTRIES 446 BROADMOOR DRIVE NASHVILLE, TN 37216		501(C)3	0.	9,766.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WESLEY HEIGHTS UNITED METHODIST CHURCH - 2101 E LINCOLN STREET - TULLAHOMA, TN 37388	31-1813333	501(C)3	0.	13,557.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WHITTAKER CHURCH OF GOD/WHEEL COMMUNITY FB - 2547 HIGHWAY 64 WEST - SHELBYVILLE, TN 37160		501(C)3	0.	438,150.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WILSON COUNTY HELP CENTER 203 W HIGH STREET LEBANON, TN 37087	62-1364149	501(C)3	0.	63,936.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WINCHESTER FIRST BAPTIST 108 S HIGH STREET WINCHESTER, TN 37398	62-0535346	501(C)3	0.	107,466.	FAIR MARKET VALUE	USDA COMMODITIES, FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WOODBURY UNITED METHODIST CHURCH 502 WEST HIGH STREET WOODBURY, TN 37190	62-1180101	501(C)3	0.	9,958.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
WOODMONT BAPTIST FOOD PANTRY 2100 WOODMONT BLVD NASHVILLE, TN 37215		501(C)3	0.	5,657.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED
YAIPAK OUTREACH 1255 PARADISE HILL ROAD CLARKSVILLE, TN 37040		501(C)3	0.	105,665.	FAIR MARKET VALUE	FOOD	TO ASSIST IN FEEDING THOSE IN NEED

Schedule I (Form 990)

SECOND HARVEST FOOD BANK OF MIDDLE TN,

Schedule I (Form 990) (Rev. 12-2024) **INC.**

62-1049447

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Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP)	21169	0.	1,178,648.	FAIR MARKET VALUE	CSFP COMMODITIES

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

TEFAP COMMODITIES ELIGIBILITY CRITERIA - PARTNER AGENCIES ARE MONITORED BY SITE VISITS BY SECOND HARVEST STAFF AND ARE REQUIRED TO SUBMIT MONTHLY INVENTORY LISTINGS OF USDA COMMODITIES RECEIVED AND USED IN FEEDING PROGRAMS. IN ORDER TO BE ELIGIBLE, ORGANIZATIONS SHOULD BE A 501(C)(3) ORGANIZATION OR AN EQUIVALENT UNICORPORATED FAITH-BASED ORGANIZATION MEETING 12/14 CRITERIA ESTABLISHED BY THE FOOD BANK.

CSFP - PARTICIPATING CLIENTS MUST BE 60 YEARS OF AGE OR OLDER, LIVE IN DAVIDSON COUNTY, AND MEET INCOME GUIDELINES. CSFP PARTNER AGENCIES ARE MONITORED BY SECOND HARVEST PERSONNEL AND CLIENTS PROVIDE PROOF OF AGE, ADDRESS AND INCOME WITH THEIR CSFP APPLICATION.

NON-CASH GRANTS ALSO INCLUDE REFRIGERATION AWARDED TO PARTNER AGENCIES TO INCREASE THEIR CAPACITY TO DISTRIBUTE HEALTHY FOOD.

SCHEDULE J
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization	SECOND HARVEST FOOD BANK OF MIDDLE TN, INC.	Employer identification number	62-1049447
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Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
- b Participate in or receive payment from a supplemental nonqualified retirement plan?
- c Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
- b Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
- b Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a	X	
5b		X
6a	X	
6b		X
7		X
8		X
9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) (Rev. 12-2024)

SECOND HARVEST FOOD BANK OF MIDDLE TN,

Schedule J (Form 990) (Rev. 12-2024) **INC.**

62-1049447

Page **2**

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) NANCY KEIL PRESIDENT/CEO	(i)	304,143.	98,680.	0.	26,264.	10,454.	439,541.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) HEATHER VERBLE CFO	(i)	196,706.	24,497.	0.	17,843.	10,211.	249,257.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KIM MOLNAR (END 8/24) COO	(i)	142,127.	26,163.	0.	13,243.	6,335.	187,868.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KARYN THOMPSON VP, HUMAN RESOURCES	(i)	135,692.	16,770.	0.	12,332.	9,620.	174,414.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) TRACEY ALDERDICE VP, COMMUNITY IMPACT	(i)	123,898.	15,510.	0.	11,220.	13,127.	163,755.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MICHAEL MICHLOWSKI DIR. TECHNOLOGY	(i)	126,332.	6,358.	0.	9,107.	18,195.	159,992.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) TROY EDWARDS (START 4/24) COO	(i)	149,858.	0.	0.	0.	8,010.	157,868.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ALICIA COPPLEY (END 2/25) SR. DIR. PHILANTHROPY	(i)	118,127.	6,206.	0.	10,634.	17,548.	152,515.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 5:

THE EXECUTIVE COMMITTEE HAS A TWO-PART REVIEW TO DETERMINE IF AND HOW MUCH IN EXECUTIVE BONUSES WILL BE PAID. THEY LOOK AT 1) ACHIEVEMENT OF ANNUAL OPERATING BUDGET, 2) ATTAINING THE GOALS SET AS KPIS FOR THE YEAR (DONATED POUNDS, POUNDS DISTRIBUTED, PRODUCE POUNDS DISTRIBUTED, FUNDRAISING, PROJECT PRESERVE NET REVENUE, AND EMPLOYEE NET PROMOTER SCORE AND COUNTIES EXCEEDING FEEDING AMERICA SERVICE TARGET BY 10%).

PART I, LINE 6:

THE EXECUTIVE COMMITTEE HAS A TWO-PART REVIEW TO DETERMINE IF AND HOW MUCH IN EXECUTIVE BONUSES WILL BE PAID. THEY LOOK AT 1) ACHIEVEMENT OF ANNUAL OPERATING BUDGET, 2) ATTAINING THE GOALS SET AS KPIS FOR THE YEAR (DONATED POUNDS, POUNDS DISTRIBUTED, PRODUCE POUNDS DISTRIBUTED, FUNDRAISING, PROJECT PRESERVE NET REVENUE, AND EMPLOYEE NET PROMOTER SCORE AND COUNTIES EXCEEDING FEEDING AMERICA SERVICE TARGET BY 10%).

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization **SECOND HARVEST FOOD BANK OF MIDDLE TN,
INC.**

Employer identification number
62-1049447

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	55	912,026.	SALES PRICE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential				
16 Real estate - Commercial	X	1	3,260,000.	APPRAISAL
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	34,165	71,781,161.	RECORDS
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (OTHER DONATIONS)	X	140	7,578.	COMPARABLE SALES
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part V, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2024

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

COLUMN B REPRESENTS THE NUMBER OF INDIVIDUAL CONTRIBUTIONS FOR LINES 9 AND 25. FOR LINE 19, COLUMN B IS THE NUMBER OF UNIQUE FOOD DONATIONS.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization SECOND HARVEST FOOD BANK OF MIDDLE TN, INC.	Employer identification number 62-1049447
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FORM 990, PART I, LINE 6:

TO DETERMINE THE NUMBER OF VOLUNTEERS THE ORGANIZATION DIVIDES THE
TOTAL NUMBER OF VOLUNTEER HOURS FOR THE FISCAL YEAR OF 75,146 BY THE
LENGTH OF THE 2.5 HOUR VOLUNTEER SHIFTS. THE ESTIMATED NUMBER OF
VOLUNTEERS FOR THE FISCAL YEAR 2025 IS 30,058.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
NETWORK (THE "NETWORK").

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

GROCERY RESCUE - THIS PROGRAM COLLECTS PERISHABLE AND NON-PERISHABLE
FOOD FROM OVER 515 RETAIL PARTNERS FOR DISTRIBUTION TO PARTNER AGENCIES
AND PROGRAM SITES. PRODUCTS RESCUED AND DISTRIBUTED INCLUDE MEAT,
PRODUCE, DAIRY, BREAD, BAKERY ITEMS, AND DRY PRODUCTS. DURING THE YEAR
ENDED JUNE 30, 2025, SECOND HARVEST PICKED UP DIRECTLY OR FACILITATED
PICKUP BY PARTNER AGENCIES OVER 14.7 MILLION POUNDS OF FOOD (EQUIVALENT
TO MORE THAN 12.2 MILLION MEALS).

SNAP OUTREACH - SECOND HARVEST OFFERS SNAP OUTREACH THROUGH OUR
NEIGHBOR CARE PANTRIES, MOBILE PANTRY DISTRIBUTIONS, AND PARTNER
AGENCIES. SNAP, PREVIOUSLY KNOWN AS FOOD STAMPS, ASSISTS LOW-INCOME
INDIVIDUALS AND FAMILIES BY PROVIDING MONTHLY ASSISTANCE TO PURCHASE
FOOD. SECOND HARVEST'S CLIENT OUTREACH STAFF SHARE INFORMATION ABOUT
THE NUTRITION BENEFITS OF SNAP, PRE-SCREEN PARTICIPANTS, AND HELP
INDIVIDUALS COMPLETE THE SNAP APPLICATION. OUTREACH STAFF ASSISTED IN
COMPLETING APPROXIMATELY 1,544 APPLICATIONS DURING THE YEAR ENDED JUNE
30, 2025.

MANUFACTURING - SECOND HARVEST OPERATES A COOK/CHILL OPERATION, WHICH
IS A METHOD OF FOOD MANUFACTURING AND SHELF-LIFE EXTENSION THAT
INVOLVES HEATING FOOD, PUMPING THE PRODUCT INTO FORM-FILL PLASTIC BAGS
THAT ARE HEAT SEALED, THEN SUPER COOLED FOR APPROXIMATELY 45 MINUTES
PRIOR TO FREEZING THE PRODUCT. FOR THE YEAR ENDED JUNE 30, 2025 THIS
PROGRAM UTILIZED MORE THAN 162,000 POUNDS OF DONATED INGREDIENTS THAT
WOULD HAVE OTHERWISE BEEN WASTED. ADDITIONALLY, THIS OPERATION PRODUCES
TRAY PACK MEALS FOR CHILDREN'S FEEDING, SENIOR NUTRITION AND PARTNER
AGENCIES THAT DO DIRECT HOME DISTRIBUTION TO CLIENTS IN NEED.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

TO THE NEEDS OF FEEDING AMERICA NETWORK FOOD BANKS FOR DISASTER RELIEF
IMMEDIATELY FOLLOWING HURRICANES HELENE AND MILTON BY PROVIDING NEARLY
127,000 ASSEMBLED FOOD BOXES (ROUGHLY 2.5 MILLION MEALS) AND 24,000
CASES OF MIXED PRODUCTS ACROSS SEVERAL STATES FOR A TOTAL OF \$3.4
MILLION IN SALES. IN ADDITION, PROJECT PRESERVE FULFILLED ORDERS FOR
PRE-STAGED EMERGENCY FOOD BOXES (\$1 MILLION IN SALES) PRIOR TO
HURRICANE SEASON, PLUS AN ADDITIONAL \$0.6 MILLION IN SALES TO REPLENISH
INVENTORY OF EMERGENCY FOOD BOXES AT NETWORK FOOD BANKS, RESULTING IN
TOTAL COMBINED SALES OF NEARLY \$5 MILLION IN FY2025.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

THE MOBILE MARKET BRINGS ESSENTIAL GROCERY ITEMS, LIKE PRODUCE, DAIRY,

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization	SECOND HARVEST FOOD BANK OF MIDDLE TN, INC.	Employer identification number	62-1049447
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PANTRY STAPLES, MEAT, AND EGGS, DIRECTLY TO COMMUNITIES MOST IMPACTED BY FOOD INSECURITY. DURING THE YEAR ENDED JUNE 30, 2025, THE MOBILE MARKET SERVED MORE THAN 67,000 PEOPLE AND DISTRIBUTED OVER 786,000 POUNDS OF FOOD.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER PROGRAM SERVICES INCLUDE:

NEIGHBOR CARE PANTRIES (PREVIOUSLY KNOWN AS EMERGENCY FOOD BOX) - THE LONGEST-OPERATING PROGRAM OF SECOND HARVEST PROVIDED NEARLY TWO MILLION MEALS DURING THE YEAR ENDED JUNE 30, 2025. EMERGENCY STAPLES, AS WELL AS PRODUCE, MEAT, AND DAIRY, ARE PROVIDED TO FAMILIES IN NEED THROUGH ITS SATELLITE CENTERS IN DAVIDSON COUNTY.

CHILDREN'S FEEDING PROGRAMS - SECOND HARVEST'S CHILDREN'S FEEDING PROGRAMS INCLUDE KIDS CAFE, AT RISK AFTER SCHOOL PROGRAM, SUMMER FOOD SERVICE PROGRAM, SCHOOL PANTRY PROGRAM, AND BACKPACK PROGRAM. KIDS CAFE, AT RISK AFTER SCHOOL PROGRAM, AND SUMMER FOOD SERVICE PROGRAM OPERATE A WEEKLY FEEDING PROGRAM FOR CHILDREN AT RISK OF HUNGER IN SEVERAL AREA COMMUNITY CENTERS AND PROVIDED NEARLY 86,000 NUTRITIOUS MEALS AND SNACKS TO CHILDREN DURING 2025. THE BACKPACK PROGRAM MEETS THE NEEDS OF HUNGRY CHILDREN BY PROVIDING THEM WITH NUTRITIOUS AND EASY-TO-PREPARE FOOD TO TAKE HOME ON WEEKENDS WHEN OTHER RESOURCES ARE NOT AVAILABLE. DURING THE YEAR ENDED JUNE 30, 2025, SECOND HARVEST DISTRIBUTED OVER 224,000 BACKPACKS TO HUNGRY CHILDREN. THE SCHOOL PANTRY PROGRAM IS DESIGNED TO INCREASE FOOD ACCESS FOR FAMILIES IN NEED. FIFTY-SIX SITES WERE OPERATED DURING THE 2025 FISCAL YEAR, PROVIDING MORE THAN 309,000 MEALS.
EXPENSES \$ 6,564,345. INCLUDING GRANTS OF \$ 1,858,801. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:
NANCY KEIL, PRESIDENT/CEO AND HEATHER VERBLE, CFO, WILL REVIEW THE 990 FOR ACCURACY. ONCE APPROVED BY THEM, IT WILL BE REVIEWED AND APPROVED BY THE AUDIT COMMITTEE OF THE BOARD. FOLLOWING THE AUDIT COMMITTEE APPROVAL, THE 990 WILL BE PROVIDED TO THE FULL BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:
AT NEW MEMBER BOARD ORIENTATION, BOARD MEMBERS ARE GIVEN A CONFLICT OF INTEREST FORM TO READ AND SIGN. THE CEO AND BOARD CHAIR REVIEW ANY ISSUES THAT COME UP.

FORM 990, PART VI, SECTION B, LINE 15:
THE EXECUTIVE COMMITTEE, COMPRISED OF BOARD MEMBERS, REVIEW THE CEO, OFFICERS, AND OTHER KEY EMPLOYEES SALARIES AND BENEFITS. THE BOARD APPROVES THE CEO COMPENSATION, AND THE CEO APPROVES ALL OTHER SALARY CHANGES AFTER CONSULTING WITH THE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19:
ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC. THE 990 AND AUDIT ARE ON THE SECOND HARVEST FOOD BANK AND GIVING MATTERS WEBSITES. THE FORM 990 IS ALSO AVAILABLE ON GUIDESTAR.

FORM 990, PART XII, LINE 2C:
THE ORGANIZATION'S OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS OR THE SELECTION PROCESS OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED

Employer identification number
62-1049447

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.